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SECRETARY OF STATE TALLAHASSEE, FLORING

# 06 AUG 21 PH 4: 14

#### **COVER LETTER**

TO: Registration Division of	n Section Corporations			
SUBJECT:	DIEGN MADISON 617	-		
	(Name o	of Limited Liability Co	mpany)	
Dear Sir or Madam:				
The enclosed Article	es of Correction and fee(s) a	re submitted for filing.	,	
Please return all corr	respondence concerning this	s matter to the followin	g;	
Dana M. Sa	antino, Esq.		_	<b>7</b> 00
	(Name of Person)		<del></del>	ÉÖ
	•			和
Kennedy Tri	inley Et Al, P.L.		_	SSA,
	(Firm/Company)			FF-5
1675 Palm H	Beach Lakes Blvd,	Suite 700		Cretary of Stat Lahassee, Flori
	(Address)		_	マラ ララ ララ ラ ラ ラ ラ ラ ラ ラ ラ ラ ラ ラ ラ ラ ラ ラ
				_
West Palm I	Beach, FL 33401		_	
	(City/State and Zip Code)			
For further informat	ion concerning this matter,	please call:		
Dana M. Sa	antino	at (	683-2484	
(N	ame of Person)	(Area Code &	& Daytime Telephone Number)	
		•		
STREET/COURIE			MAILING ADDRESS:	
Registration Section			Registration Section Division of Corporations	
Division of Corpora Clifton Building	tions	•	P.O. Box 6327	
2661 Executive Cen	ter Circle		Tallahassee, Florida 32314	
Tallahassee, Florida			•	
Enclosed is a check	for the following amount	:		
□ \$25 Filing Fee	\$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	

CR2E062 (08/05)

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 22, 2006

LAW OFFICES OF KENNEDY.TRINLEY.ET AL. P.L. 1675 PALM BEACH LAKES BLVD TE 700 WEST PALM BEACH, FL 33401

We have received your document for MADISON 617, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (859) 2 6097.

Marsha Thomas Document Specialist

Letter Number: 806A00051556

#### ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST	The name of the limited liability company is:  Madison 617, LLC	
SECO	ND: The articles of organization or the application to transact business	
(CH	HECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT	
X	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:	06 AUG
	"See Attachement"	321
	OF STATE	PM 4: 11
	<u>OR</u>	
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:	
		•
		•
	A 28 2006	
Dated:	August 28, 2006	
	Signature of a member or authorized representative of a member	
	Dana M. Santino, Esq.  Typed or printed name of signee	
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	

Article II - is incorrect and should be corrected to read as follows:

"The street address of the principal office of the Limited Liability Company is: 3168 NW 63<sup>rd</sup> Street, Boca Raton, FL 33496

The mailing address of the Limited Liability Company is: 3168 NW 63<sup>rd</sup> Street, Boca Raton, FL 33496"

Article IV - is incorrect and should be corrected to read as follows:

"The name and address of the registered agent is: RACHEL MILLER 3168 NW 63<sup>rd</sup> Street Boca Raton, FL 33496"

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties and am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

#### Electronic Articles of Organization For Florida Limited Liability Company

L06000075110 FILED 8:00 AM July 28, 2006 Sec. Of State mthomas

#### Article I

The name of the Limited Liability Company is: MADISON 617, LLC

#### Article II

The street address of the principal office of the Limited Liability Company is:

18673 OCEAN MIST DRIVE BOCA RATON, FL. US 33498

The mailing address of the Limited Liability Company is:

18673 OCEAN MIST DRIVE BOCA RATON, FL. US 33498

#### **Article III**

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

### ry of State See, Florida

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#### Article IV

The name and Florida street address of the registered agent is:

JEFF I MILLER 18673 OCEAN MIST DRIVE BOCA RATON, FL. 33498

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: JEFF MILLER

#### Article V

The effective date for this Limited Liability Company shall be: 07/27/2006

Signature of member or an authorized representative of a member Signature: DANA M SANTINO, ESQ.

FILED